

## **WASHINGTON TITLE XXI STATE PROGRAM FACT SHEET**

<b>Name of Plan:</b>	<b>Washington CHIP</b>
<b>Date Plan Submitted:</b>	June 30, 1999
<b>Date Plan Approved:</b>	September 8, 1999
<b>Effective Date:</b>	January 1, 2000
<b>Date Amendment #1 Submitted:</b>	February 8, 2001
<b>Date Amendment #1 Approved:</b>	May 7, 2001
<b>Date Amendment #1 Effective:</b>	January 1, 2001
<b>Date Amendment #2 Submitted:</b>	April 3, 2002
<b>Date Amendment #2 Approved:</b>	July 1, 2002
<b>Date Amendment #2 Effective:</b>	January 1, 2002
<b>Date Amendment #3 Submitted:</b>	October 3, 2002
<b>Date Amendment #3 Approved:</b>	December 19, 2002
<b>Date Amendment#3 Effective:</b>	July 1, 2002
<b>Date Amendment #4 Submitted:</b>	June 25, 2003
<b>Date Amendment #4 Approved:</b>	September 22, 2003
<b>Date Amendment#4 Effective:</b>	November 12, 2002
<b>Date Amendment #5 Submitted:</b>	January 22, 2004
<b>Date Amendment #5 Approved:</b>	June 16, 2004
<b>Date Amendment#5 Effective:</b>	December 31, 2003

### **Background**

- On September 8, 1999, Washington submitted a Title XXI State Plan to implement a new State Children's Health Insurance Program (SCHIP). The program provided comprehensive health care coverage to uninsured children under age 19 with family incomes above 200 percent up to and including 250 percent of the Federal poverty level (FPL).

### **Amendments**

- The State submitted its first State Plan Amendment on May 7, 2001, which modified the assignment process and eliminated the requirement for families to select a plan as part of the application process. The amendment also eliminated the requirement for families to sign a written agreement to pay premiums as a condition of eligibility.

- A second amendment was submitted by the State on April 3, 2002. This amendment eliminated co-payment charges for children enrolled in SCHIP.
- Washington submitted its third amendment on October 3, 2002, to update its State Plan to indicate compliance with the final SCHIP regulations.
- Washington submitted its fourth amendment to its title XXI State Plan to add coverage for unborn children with family incomes up to and including 185 percent of the FPL and not eligible for Medicaid. Coverage will include prenatal care and associated health services for children from conception through birth.
- On January 22, 2004, Washington submitted its fifth amendment to its title XXI State Plan to change the duration of eligibility from 12 months to 6 months. This change will affect SCHIP clients enrolled on and after July 2003, with a 6-month review date on and after December 31, 2003.

### **Children Covered Under Program**

- The State reported that 9,571 children were ever enrolled in the program during Federal fiscal year 2003.

### **Health Care Delivery System**

- The Department's Medical Assistance Administration (MAA), in coordination with the Department of Social and Health Services and other state agencies, including the Department of Health, the Governor's Office, and the Health Care Authority, administers Washington CHIP.
- The program utilizes the State's Medicaid managed care delivery system and employs the Medicaid income eligibility criteria. The managed care system consists of contracts with health carriers for medical care coverage, contracts with Regional Support Networks (RSN) for mental health care, and fee for service (FFS) for primary care case management (PCCM) clinics.
- Families are not required to select a managed care plan for their child at the time of application. An automatic assignment will be made when a family does not make a selection at the time of application and there are two or more plans in that community.

### **Benefit Package**

- Washington provides the same coverage to SCHIP children that is provided to enrollees covered under the Medicaid State Plan.

### **Cost Sharing**

- Washington charges a premium of \$10 per month per child enrolled in CHIP with a family maximum of \$30 per month.

## **Crowd-Out Strategy**

- In order to avoid crowd out, eligible children must be uninsured for 4 months prior to application in cases where the applicant had employer-sponsored dependent coverage. The State allows for certain exceptions to the 4-month waiting period.
- The SCHIP application requests information regarding other insurance coverage for each child.

## **Outreach Activities**

- MAA implemented a statewide, community-based Medicaid Client Outreach project and the Health Kids Now (HKN) public information campaign. Both of these activities target Medicaid and SCHIP children. The HKN campaign includes statewide activities, facilitating community efforts and a toll-free number.
- The State also contracts with community based organizations. Contractors receive a monthly set rate and a \$20 incentive for each client a contractor helps enroll. Community-based contractors perform the following activities: identify people who are likely to be eligible for coverage, account for Federal outreach funds in accordance with Federal requirements, and assist new clients with selection a Healthy Options health care plan that will best meet their needs.

## **Coordination Between SCHIP and Medicaid**

- Washington uses two standardized application forms to make eligibility determinations. One form is used for clients applying for the Medicaid children's medical program (a one-page form). The other form is used for clients applying for cash benefits, food stamps, medical coverage and other benefits. Potential SCHIP eligibles can apply for medical coverage by using either form. Information from the application is entered into the State's Automated Client Eligibility System (ACES), which automatically generates SCHIP eligibility notices and yearly reviews.

## **Financial Information**

Total FFY '04 SCHIP Allotment -- \$50,326,484  
FFY '04 Enhanced Federal Matching Rate -- 65.00%

***Date Last Updated: June 24, 2004***